



Attorney Docket No. 1743

Patent
034345-095

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Nathan S. Lewis et al.

Group Art Unit: 1743

Application No.: 09/842,204

Examiner: BRIAN J SINES

Filing Date: April 24, 2001

Confirmation No.: 5403

Title: SPATIOTEMPORAL AND GEOMETRIC OPTIMIZATION OF SENSOR ARRAYS FOR DETECTING

AMENDMENT/REPLY TRANSMITTAL LETTER

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Enclosed is a reply for the above-identified patent application.

- ☐ A Petition for Extension of Time is also enclosed.
- ☐ Terminal Disclaimer(s) and the ☐ \$65.00 (2814) ☐ \$130.00 (1814) fee per Disclaimer due under 37 C.F.R. § 1.20(d) are also enclosed.
- ☒ Also enclosed is/are return receipt postcard
- _____
- _____
- _____
- _____
- _____
- ☒ Small entity status is hereby claimed.
- ☐ Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the ☐ \$395.00 (2801) ☐ \$790.00 (1801) fee due under 37 C.F.R. § 1.17(e).
- ☐ Applicant(s) requests that any previously unentered after final amendments not be entered. Continued examination is requested based on the enclosed documents identified above.
- ☐ Applicant(s) previously submitted _____
- _____
- _____
- on _____,
- for which continued examination is requested.
- ☐ Applicant(s) requests suspension of action by the Office until at least _____, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.
- ☐ A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed.

Buchanan Ingersoll PC
ATTORNEYS
Including attorneys from Burns Doane Sweeney & Mathis

Page 1 of 2
(8/05)

- ☒ No additional claim fee is required.
- ☐ An additional claim fee is required, and is calculated as shown below.

AMENDED CLAIMS					
	No. of Claims	Highest No. of Claims Previously Paid For	Extra Claims	Rate	Additional Fee
Total Claims	69	MINUS 73 =	0	x \$50.00 (1202) =	\$ 0.00
Independent Claims	6	MINUS 6 =	0	x \$200.00 (1201) =	\$ 0.00
If Amendment adds multiple dependent claims, add \$360.00 (1203)					
Total Claim Amendment Fee					\$ 0.00
<input checked="" type="checkbox"/> Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee					\$ 0.00
TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT					\$ 0.00

- ☐ A check in the amount of _____ is enclosed for the fee due.
- ☐ Charge _____ to Deposit Account No. 02-4800.
- ☐ Charge _____ to credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.


Respectfully submitted,

BUCHANAN INGERSOLL PC

12230 El Camino Real
Suite 300
San Diego, CA 92130-2090
(858) 509-7300

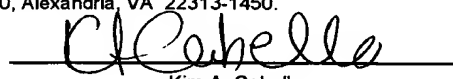
Date: October 20, 2005

By


Joseph R. Baker, Jr.
Registration No. 40,900

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date of Deposit: October 20, 2005


Kim A. Cabello
Typed Name:

Buchanan Ingersoll PC

ATTORNEYS

Including attorneys from Burns Doane Swecker & Mathis



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Nathan S. Lewis et al.

Application No.: 09/842,204

Filed: April 24, 2001

For: SPATIOTEMPORAL AND
GEOMETRIC OPTIMIZATION OF
SENSOR ARRAYS FOR
DETECTING

) **Mail Stop Amendment**

) Group Art Unit: 1743

) Examiner: BRIAN J SINES

) Confirmation No.: 5403

) Certificate of Mailing

) I hereby certify that this correspondence is being
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) Alexandria, VA 22313-1450.

) Date: October 20, 2005

) By: _____

) 
) Kim A. Cabello

RESPONSE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated September 20, 2005, please enter the
following amendments and remarks: